

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
P.O. BOX 52000
OKLAHOMA CITY, OK 73152-2000
(Rule 165:10-3-1)

API NUMBER: 117 23586

Approval Date: 03/24/2014

Expiration Date: 09/24/2014

Straight Hole Oil & Gas

PERMIT TO DRILL

WELL LOCATION: Sec: 16 Twp: 20N Rge: 5E

County: PAWNEE

SPOT LOCATION:

FEET FROM QUARTER: FROM SOUTH FROM WEST

SECTION LINES: 2310 330

Lease Name: MARY

Well No: 1-16

Well will be 330 feet from nearest unit or lease boundary.

Operator Name: MT DORA ENERGY LLC

Telephone: 5804709230; 5804709

OTC/OCC Number: 22348 0

MT DORA ENERGY LLC
PO BOX 190
DUNCAN, OK 73534-0190

COMMISSIONERS OF THE LAND OFFICE
120 N. ROBINSON, SUITE 1000 W.
OKLAHOMA CITY OK 73102

Formation(s) (Permit Valid for Listed Formations Only):

Name	Depth	Name	Depth
1 CLEVELAND	2958	6 WILCOX	3872
2 RED FORK	3420	7 ARBUCKLE	3990
3 MISSISSIPPIAN	3645	8	
4 WOODFORD	3795	9	
5 SIMPSON DOLOMITE	3850	10	

Spacing Orders: 622846

Location Exception Orders:

Increased Density Orders:

Pending CD Numbers: 201401751

Special Orders:

Total Depth: 4000

Ground Elevation: 1067

Surface Casing: 440

Depth to base of Treatable Water-Bearing FM: 390

Under Federal Jurisdiction: No

Fresh Water Supply Well Drilled: No

Surface Water used to Drill: No

PIT 1 INFORMATION

Type of Pit System: ON SITE

Type of Mud System: WATER BASED

Chlorides Max: 3000 Average: 2000

Is depth to top of ground water greater than 10ft below base of pit? Y

Within 1 mile of municipal water well? N

Wellhead Protection Area? N

Pit is located in a Hydrologically Sensitive Area.

Category of Pit: 2

Liner not required for Category: 2

Pit Location is BED AQUIFER

Pit Location Formation: VAMOOSA

Approved Method for disposal of Drilling Fluids:

A. Evaporation/dewater and backfilling of reserve pit.

Notes:

This permit does not address the right of entry or settlement of surface damages.
The duration of this permit is SIX MONTHS, except as otherwise provided by Rule 165: 10-3-1.
Rule 165: 10-3-4 (c) (7) (e) - The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

117 23586 MARY 1-16

Category	Description
FRAC FOCUS	3/10/2014 - G71 - THE REQUIREMENT FOR CHEMICAL DISCLOSURE OF HYDRAULIC FRACTURING INGREDIENTS WILL BE EXTENDED TO INCLUDE ALL NON-HORIZONTAL WELLS FOR HYDRAULIC FRACTURING OPERATIONS BEGINNING JANUARY 1, 2014. REFER TO OCC RULE 165:10-3-10 FOR COMPLIANCE REQUIREMENTS. PLEASE REPORT DIRECTLY TO FRACFOCUS USING THE FOLLOWING LINK HTTP://FRACFOCUS.ORG/ OR FOR OCC ASSISTANCE CONTACT DENNIS NISKERN AT 405-522-2977 OR D.NISKERN@OCCEMAIL.COM
PENDING CD - 201401751	3/24/2014 - G75 - (E.O.) 16-20N-5E X622846 CLVD, RDFK, MSSP, WDFD, SMPSD, WLCX, ABCK NCT 330 FNL, NCT 1320 FEL MR. DORA ENERGY, LLC REC 3-24-2014 (DECKER)
SPACING - 622846	3/24/2014 - G75 - (640) 16-20N-5E EST CLVD, RDFK, MSSP, WDFD, SMPSD, WLCX, ABCK

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Rule 165: 10-3-4 (c) (7) (e) - The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

API 117-23586

APPLICATION TO DRILL, RECOMPLETE OR REENTER

FORM 1000 REV. 2006

FILE ORIGINAL ONLY PLEASE TYPE OR USE BLACK INK

OKLAHOMA CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION JIM THORPE BUILDING P.O. BOX 52000 OKLAHOMA CITY, OK 73152-2000 (RULE 165:10-3-1)

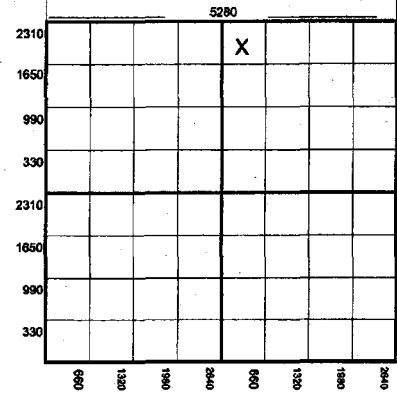
BATCH NUMBER (OCC USE ONLY)

1. OTC/OCC OPERATOR NUMBER 22348

3. NOTICE OF INTENT TO: (CHECK ONLY ONE) DRILL RECOMPLETE REENTER DEEPEN AMEND - REASON

4. TYPE OF DRILLING OPERATION: STRAIGHT HOLE, DIRECTIONAL HOLE, HORIZONTAL HOLE

6. LOCATE WELL AND OUTLINE LEASE OR SPACING UNIT IN INK.



5. WELL LOCATION: SECTION 16 TOWNSHIP 20N RANGE 5E COUNTY Pawnee

7. Well will be 330 feet from nearest unit or property boundary. 8. LEASE NAME: Mary WELL NUMBER: 1-16

9. NAME OF OPERATOR: Mt. Dora Energy, LLC EMAIL ADDRESS: knewby@mtdoraenergy.com ADDRESS: P.O. Box 190 PHONE (AC/NUMBER): 580-470-9230 CITY: Duncan STATE: Oklahoma ZIP CODE: 73534

10. SURFACE OWNER (ONE ONLY, ATTACH SHEET FOR ADDITIONAL OWNERS) Commissioners of the Land Office ADDRESS: 120 N. Robinson, Suite 1000 W. CITY: Oklahoma City STATE: Oklahoma ZIP CODE: 73102

11. Is well located on lands under federal jurisdiction? Y X N 12. Will a water well be drilled? Will surface water be used? Y X N 13. Date Operation to Begin 3-12-2014

- 14. LIST TARGET FORMATIONS AND DEPTHS OF EACH BELOW (LIMITED TO TEN) 1) Cleveland @ 2958 2) Red Fork @ 3420 3) Mississippi @ 3645 4) Woodford @ 3795 5) Simpson Dolomite @ 3850 6) Wilcox @ 3872 7) Arbuckle @ 4158-3990' per # 201400833 8) 9) 10)

15. SPACING ORDER NUMBER(S) AND SIZE UNIT(S): CD# 201400833

16. PENDING APPLICATION C.D. NO. 201401751 Hearing 3-24-2014 17. LOCATION EXCEPTION ORDER NO. 18. INCREASED DENSITY ORDER NO.

TEMPORARY AUTHORIZATION TO DRILL Expiration Date: 3-26-2014 (Desk week) Signature: [Handwritten] 165:10-3-1-1

24. ALTERNATIVE CASING PROCEDURE, check box and fill in blank (AFFIDAVIT REQUIRED, see reverse side, line 31.) A. Cement will be circulated from total depth to ground surface on the production casing string. B. Cement will be circulated from depth to depth by use of a two stage cementing tool. 25.1. PIT INFORMATION: Using more than one pit or mud system? Y X N If yes, fill out line 25.2 on top reverse side. A. TYPE OF MUD SYSTEM: X WATER BASED OIL BASED GAS BASED (AIR DRILL) B. EXPECTED MUD CHLORIDE CONTENT: maximum 3000 ppm; average: 2000 C. TYPE OF PIT SYSTEM: X on-site off-site closed; If off-site, specify location D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? X Y N E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? Y X N F. WELLHEAD PROTECTION AREA? Y X N

26.1 OCC USE ONLY A. CATEGORY 1B (2) 3 C D. DEEP SCA? Y X N E. CBI required? Y X N F. SOIL COMPACTED LINER REQUIRED? Y X N G. 20 ml GEOTECHNICAL LINER REQUIRED? Y X N

27. PROPOSED METHOD FOR DISPOSAL OF DRILLING FLUIDS (MUST BE COMPLETED) A. Evaporation/dewater and backfilling of reserve pit. B. Solidification of pit contents. C. Annular injection (REQUIRES PERMIT and surface casing set 200 feet below base of treatable water-bearing formation.) PERMIT NO. D. One time land application (REQUIRES PERMIT) PERMIT NO. E. Haul to Commercial pit facility; Specify site: Order No. F. Haul to Commercial soil farming facility; Specify site: Order No. G. Haul to recycling/re-use facility; Specify site: Order No. H. Other, Specify:

I hereby certify I am authorized to submit this two page application prepared by me or under my supervision. The facts and proposals made herein are true, correct and complete to the best of my knowledge and belief. SIGNATURE: Kevin Newby NAME (Print or Type) PHONE (AC/NO.) 405-360-0017 FAX 309-404-3779 DATE 3-6-14

NOTICE: Approval is void if operations have not commenced within six months of the date of approval. An approved permit must be posted at the location during drilling and completion operations. File the Form 1001A, Spud Report, within fourteen days of commencement of operations.

16 20N SEC TOWNSHIP RANGE 5E

NOTIFY DISTRICT OFFICE 24 HOURS PRIOR TO CEMENTING SURFACE CASING.

25.2. PIT INFORMATION:

- A. TYPE OF MUD SYSTEM: WATER BASED OIL BASED GAS BASED (AIR DRILL)
 B. EXPECTED MUD CHLORIDE CONTENT: maximum _____ ppm; average: _____ ppm.
 C. TYPE OF PIT SYSTEM: on-site; off-site closed; If off-site, specify location: _____
 D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? Y N
 E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? Y N
 F. WELLHEAD PROTECTION AREA? Y N

Off-Site Pit No. _____

26.2 OCC USE ONLY A. CATEGORY 1A 1B 2 3 4 C Frm: _____

B. PIT LOCATION: Alluvial Plain Terrace Deposit Bedrock Aquifer Other H.S.A. Non-H.S.A.
 C. Special area or field rule? D. DEEP SCA? Y N E. CBL? Y N
 F. SOIL COMPACTED LINER REQUIRED? Y N G. 20 mil GEOMEMBRANE LINER REQUIRED? Y N

29. Bottom Hole Location SEC _____ TWP _____ RGE _____ COUNTY _____
 for Directional Hole:

SPOT LOCATION 1/4 _____ 1/4 _____ 1/4 _____ 1/4 _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Measured Total Depth _____ True Vertical Depth _____ BHL from nearest Lease, Unit, Or Property Line: _____

30. Bottom Hole Location for Horizontal Hole: (LATERALS)

LATERAL #1: SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION 1/4 _____ 1/4 _____ 1/4 _____ 1/4 _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Depth of Deviation _____ Radius of Turn _____ Direction _____ Total Length _____

Measured Total Depth _____ True Vertical Depth _____ End Point location from nearest lease, unit or property line: _____

LATERAL #2: SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION 1/4 _____ 1/4 _____ 1/4 _____ 1/4 _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Depth of Deviation _____ Radius of Turn _____ Direction _____ Total Length _____

Measured Total Depth _____ True Vertical Depth _____ End Point location from nearest lease, unit or property line: _____

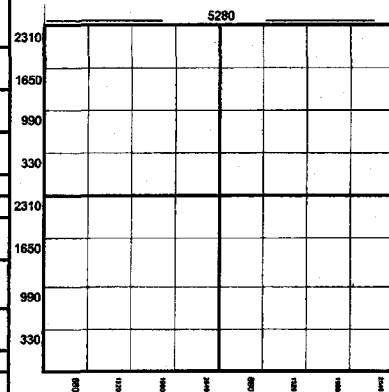
LATERAL #3: SEC _____ TWP _____ RGE _____ COUNTY _____

SPOT LOCATION 1/4 _____ 1/4 _____ 1/4 _____ 1/4 _____ FEET FROM QUARTER from SOUTH LINE from WEST LINE
 SECTION LINES: _____

Depth of Deviation _____ Radius of Turn _____ Direction _____ Total Length _____

Measured Total Depth _____ True Vertical Depth _____ End Point location from nearest lease, unit or property line: _____

28. Locate Bottom Hole



1. If more than two drainholes are proposed, attach separate sheet indicating the necessary information.
2. Direction must be stated in degrees azimuth.
3. Please note the horizontal drainhole and its end point must be located within the legal boundaries of the lease or spacing unit. Directional surveys are required for all drainholes and directional wells.

31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM

(Signature on front of this form attests to this affidavit)

1. This well WILL WILL NOT penetrate any known lost circulation zones.
2. During the drilling of this well, withdrawals from any water well within 1/4 mile WILL WILL NOT exceed 50 gallons per minute.
3. The projected depth of the well IS IS NOT less than 100 feet from the top of any enhanced recovery project or gas storage facility.
4. List the following for all water wells within 1/4 mile of this well. (Information concerning some water wells may be obtained from the OKLAHOMA WATER RESOURCES BOARD, 3800 N. Classen Blvd., Oklahoma City, OK 73118). IF NO WATER WELLS FOUND SO STATE: _____ (ATTACH ADDITIONAL SHEET IF NECESSARY)

Name of Owner/Operator	Address of Owner/Operator	Location (Nearest 1/4 1/4 1/4)	Depth of Well

5. A cement bond log is required to be run and submitted from not less than 100 feet below the base of the treatable water-bearing formation to the surface.
6. If casing depth is more than 250 feet deeper than base of the treatable water-bearing formation, operator must submit a letter of request listing reasons and precautions to be taken.

INTENT TO DRILL CHECKLIST

APPROVED Li REJECTED _____

1. SURETY 6-8-14
 A. NONE filed.
 B. EXPIRED: Date _____
 C. OUTSTANDING CONTEMPT ORDER.

4. GEOLOGY

OCC USE ONLY

DO NOT WRITE INSIDE THIS BOX

DATE: 03/10/2014 Time: 11:10
 Case: 000000000 Cashier: RBS
 Payor: NI DORA ENERGY \$175.00
 Check: 1912
 46 Intent to Dr-111
 RECEIPT 1488548845
 OKLA CORP COM